## AFFIDAVIT

STATE OF MASSACHUSETTS )	
COUNTY OF Soffolk, ss.:	
,	
I, Lar Kabinovirz being	g duly sworn, depose and state:
(Print Full Name)	, 1
I am employed by Philip Morris Incorporated as a TSM.	
/ /	
On 10/15/. 1997 I purchased the cigarettes in the quantities indicated from	ne following brand styles of Marlboro
cigarettes in the quantities indicated from	n and located
at 942A HYDE PARK AVE HP within the	(Name of Retailer) County of Suffolk, at a total
(Street Address of Retailer)	country of the total
cost of \$176.00.	
Mariboro Brand Style	Quantity of Packs Purchased
(Check for each Purchased)	(Complete for each Purchased)
·	· · · ·
Marlboro Long Size (Box)	
Marlboro King Size (SP)	
Marlboro King Size (25/pack)	
Marlboro 100 (SP)	
Marlboro 100 (Box)	
Marlboro Menthol King Size (SP)	
Marlboro Menthol King Size (Box)	
Marlboro Medium King Size (SP)	4
Marlboro Medium King Size (Box)	<u> </u>
Marlboro Medium 100 (SP)	
Marlboro Medium 100 (Box)	4
Marlboro Lights King Size (SP)	
Marlboro Lights King Size (25/pack)	
Marlboro Lights King Size (Box)	<u> </u>
Marlboro Lights 100 (SP)	
Marlboro Lights 100 (Box)	<i>u</i>
Marlboro Lights Menthol King Size (SP)	
Marlboro Lights Menthol King Size (Box)	<u> </u>
Marlboro Lights Menthol 100 (SP)	
Mariboro Lights Menthol 100 (Box)	<u></u>

I sub	mit this Affidavit for the benefit of the State of Massachusetts with the
understand	ing that it will be relied upon to determine whether Philip Morris
Incorporated has complied with the Massachusetts Regulation, "Cigarette and	
Smokeless '	Tobacco Products: Reports of Added Constituents and Nicotine Ratings".
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10/13	9/ and Jahren
/ Date	Signature